

Dear Members of the Human Services Committee of Connecticut General Assembly:

My name is Jessica Thompson, and I am a nurse practitioner at Fair Haven Community Health Care. I currently work in a school-based health center in New Haven.

I stand in support of SB284: AN ACT INCREASING THE AGE FROM EIGHT TO EIGHTEEN YEARS FOR AN INCOME-ELIGIBLE PERSON TO OBTAIN MEDICAL ASSISTANCE REGARDLESS OF IMMIGRATION STATUS. Expanding access to HUSKY up to age 18 regardless of immigration status is an important step in making sure our immigrant community has access to the healthcare we all need and deserve. But our work doesn't end with expanding access up to age 18; we need to open access to HUSKY and healthcare to all immigrants of any age, including parents and adults.

I have been providing primary medical care to children as a school-based nurse practitioner for almost 10 years. I have also worked in palliative home care. I visited and counseled home-bound patients approaching the end of their lives, with many at the end of their largely preventable chronic illnesses. Many of my palliative care patients did not receive adequate healthcare support as children and young adults. I have the unique experience of being able to see first-hand what will happen to my pediatric patients should they not have access to healthcare as they become adults and face the many barriers in our healthcare system.

As a healthcare provider I am responsible for providing care to ALL patients regardless of race, gender, sexual orientation, income or immigration status. However, CT does not allow healthcare providers to honor this purpose. Undocumented immigrants are unable to qualify for Husky, which greatly reduces their access to healthcare. As a school-based healthcare provider I understand the value of access to healthcare. We are often the only access point for uninsured children to seek medical, dental, and mental health services. We are able to provide those basic healthcare services for free. However, this is based on funding that has historically been reduced in the state of CT over the past decade. We are also not available in every school. Children come to the school-based health center in need of our services, with exacerbated conditions that could have been prevented if they were able to seek care earlier in the process. CT school-based health centers see 44,000 students annually in 26 communities. This is a successful healthcare model because it allows children to access health services without the barrier of having to self-pay should they be uninsured. We are able to reduce absenteeism by reducing unmet health care needs. Children living in poverty, especially those with chronic conditions like asthma, are at an increased risk of chronic absenteeism, which puts them at risk of not reaching their full potential as students, and as successful adults.

I frequently see pediatric illnesses become out of control due to lack of health insurance. I often see uncontrolled asthma, which can have severe complications during the immediate period of exacerbation, as well as lifelong challenges and complications of having a chronic illness not well managed. I see poor nutrition and poor dental care, children with such severe tooth decay that are unable to eat or be in school due to the pain, and have never had a dental exam or cleaning. I had a newcomer student arrive at my health center without insurance, with a history of spina bifida in need of several specialty referrals, all extremely difficult to place and have paid for. I have seen children with seizure disorders in need of maintenance medication and specialty care with no way to access the care they need without health insurance. I had another newcomer child with a heart murmur found on his school entry exam that needed to be seen by a cardiologist in order to be cleared for sports. That child waited months for an appointment, with parents forced to self-pay even though this was an incredible hardship and an unrealistic ask. During

the wait time the child could not participate in any activities, making him sedentary and at risk for obesity with the potential for life-long consequences. We have children and young adults in dire need of mental health services. The COVID-19 epidemic and school closures have magnified this need and forced our immigrant families to experience worsening educational disparities, reduced access to key resources found in schools and subsequent trauma.

Passing this bill will allow me to better support my patients and would improve health outcomes. I will be able to refer my patients to primary care providers and to specialty providers including mental health and dental. Children and teens will be given the best chance to access high-quality and age-appropriate care. The consequences of a child not receiving adequate health care are catastrophic over the course of their lifespan and I have seen devastating outcomes. Being uninsured places our most vulnerable families at risk for poor health outcomes including absenteeism, failure to graduate high school, disengagement and decreased future earning potential.

I support S.B. 284 and I ask the committee to support and pass this legislation that expands healthcare access to our most vulnerable community members. Looking forward, I ask the committee to work towards opening access to all community members in CT regardless of age or status.

Thank you for your time,

*Jessica Thompson, MSN, APRN, NP-C*